PID:					



Criminal History Information Form Please

Print Legibly if not typed. Use drop down boxes where available.

This information is only used as identifying a person; not a hiring tool.

Name:				
	Last, First, Middl	e - full na	me	
Suffix or ALL previous legal names:				
Date of Birth:				
Social Security #:				
Race: Gender:	Height: Feet	& Inches	Weight:	
Hair Color (as of today):	Eye Color:			
Driver's License#:	Class:	State	:	
Physical Address:				
Street Number & Name		City	State	ZIP
Telephone:	Place o	f Birth:		
High School Education completed b	oy (circle one):		ty, State or Town/Coun ol Diploma G	etry ED
Primary Email:				
Are you a U.S. Citizen? YES NO				

Bell County Sheriff's Department – Sheriff Eddy Lange 111 W. Central Ave, Belton, TX 76513 254-933-5992

jenny.clay@bellcounty.texas.gov

AUTHORITY TO RELEASE INFORMATION

This release, when presented by a duly authorized representative of the Bell County Sheriff's Department, constitutes my consent and authority to examine and obtain copies and abstracts of records and to receive statements and information regarding my background.

Specifically, I authorize the release of the following data or records to the Bell County Sheriff's Department: *Employment, Educational, Medical, Psychological; Selective Service; Police and Criminal; Motor Vehicle and Driving; Financial and Credit; Polygraph Examinations; and the UNDELETED copy my military separation document and medical records from the appropriate Military Records Center and Department of Veterans Affairs.*

This authorization is given in connection with a background investigation being conducted relative to my application for, or continued employment with, the Bell County Sheriff's Department. The intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing an investigation, which may provide pertinent data for the Bell County Sheriff's Department, to consider my suitability for employment.

I understand that any information obtained by a personal history background investigation, which is developed directly or indirectly, in whole or in part upon this release authorization, will be considered in determining my suitability for employment by the Bell County Sheriff's Department. I understand that all materials pertaining to this background investigation become the property of the Bell County Sheriff's Department and will not be returned to me.

I agree to indemnify and hold harmless the person to whom this request is presented and his/her agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request. I further understand that in the event my application is disapproved, the confidential information or source of information will not be revealed to me.

I understand that in the event the investigating agency finds conduct that is illegal or unbecoming of a police officer and I am currently serving in the capacity of a jailer/police officer in a jurisdiction, the investigating agency has my permission to disclose the information to my current employer.

A photocopy of this release form will be valid as an original hereof, even though the said photocopy does not contain an original writing of my signature.

Applicant's Printed Full Name:		_
Address:		
Telephone Number:		
Last four of Social Security Number:		
Do not fill	l out the signature line i	until in presence of Notary:
Applicant Signature:	-	
	' = '	Commission Expires:, 20, in and for Bell County, in the State of Texas.